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OCT 11 2006

**13 Jefferson Drive
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normahenderson@adelphia.net**FACSIMILE TRANSMITTAL SHEET**FROM: Norma E. Henderson**CONFIDENTIALITY NOTICE**DATE: October 11, 2006NUMBER OF PAGES TRANSMITTED
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TO: Mail Stop AMENDMENT (Examiner Jeffrey S. Lundgren, Art Unit 1639)FIRM: U.S. Patent and Trademark OfficeRE: Amendment and Response to Office Action – Pat. App. Ser. No. 10/622,126

PHONE

NUMBER: 571-272-5541

FAX

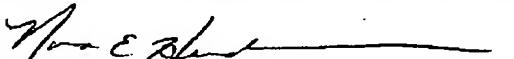
NUMBER: 571-273-8300**NOTES/COMMENTS:**

Amendment and Response to 4/11/2006 office Action for Patent Application Ser. No. 10/622,126 (Docket No. 056754/0125184).

The following items are being sent herewith:

- Transmittal form (1 page)
- Extension of Time Request (1 page)
- Credit Card Form (1 page)
- Amendment and Response to Office Action (21 pages)
- Information Disclosure Statement/PTO-1449 (3 pages)
- Cited references (5) (48 pages)

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PTO/SB/21 (09-04)

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FORM

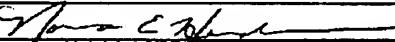
(to be used for all correspondence after initial filing)

		Application Number	10/622,126
		Filing Date	July 17, 2003
		First Named Inventor	Jacobson, Joseph M.
		Art Unit	1639
		Examiner Name	Lundgren, Jeffrey S.
Total Number of Pages in This Submission	75	Attorney Docket Number	056754/0125184

ENCLOSURES (Check all that apply)

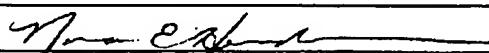
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO-1449; copies of NPL (5 refs)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Henderson Patent Law		
Signature			
Printed name	Norma E. Henderson		
Date	October 11, 2006	Reg. No.	39,219

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